

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

SERIAL NO.

APPLICANT(S)

FILING DATE

04/14/01

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/					
2		/				
3	/					
4	/					
5	/					
6	/					
7	/					
8	/					
9	/					
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20	19	V				
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23	19	V				
24	19	V				
25	19	V				
26	19	V				
27	19	V				
28	19	V				
29	19	V				
30	19	V				
31	19	V				
32	1					
33	1					
34	2					
35						
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43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	1					
TOTAL DEP.	250					
TOTAL CLAIMS	251					

CLAIMS	IND	DEP	IND	DEP	IND	DEP
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TOTAL DEP.						
TOTAL CLAIMS						